		PAIENI A	PPLICA s	TION FEE (DETERMINA	puna 10 a collection of informati TION RECORD	on unless it displays a valid (NT OF COME
	10-10-17						Dockel Number	
	CLAIMS AS FILED - PART I (Column 1) (Column 2)						10 8 1,	811
.	FOR BASIC FEE		NUMBER FILED		NUMBER EXTRA	SMALL ENTIT	Y OR SM	HER THAIL
-	TOTAL CLAIMS))			TOMBER EXTRA	RATE FEE	RATE	· £0
-	(37 CFR 1.16(c)		minus 20 =			75 5	OR OR	S_
	(37 CFR 1.16(b)	CLAIMS I ·	min	us 3 = :		X S (2) =	OR x s 50	=
L	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))				dii	x s 100=	OR x s 200	2
- 1		(the difference in column 1 is less than zero, enter "0" in column 2.				+s <u>180</u>	OR + 360	
						TOTAL	OR TOTAL	1
	CLAIMS AS AMENDED - PART II				•	- inc		
-	(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST					SMALL ENTITY	OR OTHE	ER THAN
DAMENIONALA	16 og	REMAININ	(G	HIGHES	PRESENT	CATE	SMAL	LENTITY
	Total (31 CFR 1.16(c)	. 1	NT Minu	PREVIOUS PAID FOR	3	TIONAL FEE	RATE	ADOI TIONAL
	Independent (31 OFR 1.16(t)		Minu	30		x s 25 =	OR x 50 =	FEE
AAA	FIRST PRESC			1 9		x s_100=	1 200	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ s 180=	OR $\times 30$	ļ
						TOTAL ADO'L FEE	TOTAL	
<u> </u>	T	(Column 1)		(Column 2	(Column 3)		OR ADO'L FEE	
AMENDMENT (REMAINING AFTER AMENDMENT	1	HIGHEST NUMBER PREVIOUSLY	PRESENT EXTRA	RATE ADDI-	RATE	ADDÍ:
Š	Total (16(d)		Minus	PAID FOR	=	× s 25 =		TIONAL FEE
WE	fridependent (37 CFR 1.16(b))		'Minus		=	× s 100=	OR x \$ 50=	
A	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ \$ 180=	OR x s 200=	
					TOTAL ADO'L FEE	OR +360	<u> </u>	
7		(Column 1)		(Column 2)	(Column 3)		OR ADD'L FEE	
AMENDMENT C		CLAIMS ' REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY	PRESENT EXTRA	RATE ADDI-	RATE	ADDI-
2	Total (37 CFR 1.16(c))		Minus	PAID FOR	= :	TIONAL FEE		TIONAL FEE
티	(1) CFR 1.16(6)		Minus	444 .	=		OR x 5 50 =	
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					× s 100	OR . x s 200	
		•			+ s \ 80=	OR + 360_		
•	If the entry in co	olumn 1 is less tha lumber Previous	in the entry	in column 2, write	e "0" in column 3. s less than 20, ent	ADO'L FEE .	OR ADD'L FEE	
	II the "Highest N	lumber Previously	Paid For	N THIS SPACE I	s less than 20, ent	er *20*.		

The Highest Number Previously Paid For (NTHIS SPACE is less than 3, enter "3".

The Highest Number Previously Paid For (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS